

## CLAIMS ONLY

Application Number

101604,373

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	<del>1</del>	<del>1</del>				
2		1				
3		1				
4		1				
5		1				
6	1					
7	1					
8	1					
9		1				
10		1				
11		1				
12	1					
13	1					
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48						
49						
50						
Total Indep	3					
Total Depend	11					
Total Claims	14					

\* May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						